

**UNITED STATES BANKRUPTCY COURT
NORTHERN DISTRICT OF ILLINOIS
EASTERN DIVISION**

In re:	Case No. 15-09387
LASHAICA SHUMAKER	
Debtor(s)	

CHAPTER 13 STANDING TRUSTEE'S FINAL REPORT AND ACCOUNT

Tom Vaughn, chapter 13 trustee, submits the following Final Report and Account of the administration of the estate pursuant to 11 U.S.C. § 1302(b)(1). The trustee declares as follows:

- 1) The case was filed on 03/17/2015.
- 2) The plan was confirmed on NA.
- 3) The plan was modified by order after confirmation pursuant to 11 U.S.C. § 1329 on NA.
- 4) The trustee filed action to remedy default by the debtor in performance under the plan on NA.
- 5) The case was dismissed on 07/07/2015.
- 6) Number of months from filing to last payment: 4.
- 7) Number of months case was pending: 8.
- 8) Total value of assets abandoned by court order: NA.
- 9) Total value of assets exempted: NA.
- 10) Amount of unsecured claims discharged without payment: \$0.00.
- 11) All checks distributed by the trustee relating to this case have cleared the bank.

Receipts:

Total paid by or on behalf of the debtor	\$400.00
Less amount refunded to debtor	\$0.00

NET RECEIPTS:

\$400.00

Expenses of Administration:

Attorney's Fees Paid Through the Plan	\$381.60
Court Costs	\$0.00
Trustee Expenses & Compensation	\$18.40
Other	\$0.00

TOTAL EXPENSES OF ADMINISTRATION:

\$400.00

Attorney fees paid and disclosed by debtor:	\$0.00
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Scheduled Creditors:

Creditor Name	Class	Claim Scheduled	Claim Asserted	Claim Allowed	Principal Paid	Int. Paid
AMERICASH LOANS LLC	Unsecured	1,200.00	NA	NA	0.00	0.00
ARMOR SYSTEMS CORP	Unsecured	200.00	NA	NA	0.00	0.00
ASSOCIATED PATHOLOGY CONSULT	Unsecured	0.00	NA	NA	0.00	0.00
BALLYS TOTAL FITNESS	Unsecured	200.00	NA	NA	0.00	0.00
BEVERLY BEHAVIORAL HEALTH	Unsecured	14.00	NA	NA	0.00	0.00
Choice Recovery, Inc	Unsecured	30.00	NA	NA	0.00	0.00
CITIBANK USA	Unsecured	940.00	NA	NA	0.00	0.00
CITY OF CHICAGO DEPT OF REVENUE	Unsecured	266.00	NA	NA	0.00	0.00
COMCAST	Unsecured	282.00	NA	NA	0.00	0.00
COMCAST	Unsecured	282.00	NA	NA	0.00	0.00
CONSULTANTS IN CLINICAL PATHO	Unsecured	50.00	NA	NA	0.00	0.00
ELMHURST CLINIC	Unsecured	201.00	NA	NA	0.00	0.00
ELMHURST EMERGENCY MED SVCS	Unsecured	154.00	NA	NA	0.00	0.00
ELMHURST EMERGENCY MEDICAL	Unsecured	0.00	NA	NA	0.00	0.00
ELMHURST RADIOLOGISTS	Unsecured	0.00	NA	NA	0.00	0.00
FIRST BK & TRUST	Unsecured	800.00	NA	NA	0.00	0.00
FIRST PREMIER BANK	Unsecured	400.00	NA	NA	0.00	0.00
ILLINOIS COLLECTION SVC	Unsecured	85.00	NA	NA	0.00	0.00
INTERNAL REVENUE SERVICE	Priority	11,258.00	8,283.73	8,283.73	0.00	0.00
INTERNAL REVENUE SERVICE	Unsecured	NA	2,993.82	2,993.82	0.00	0.00
JH STROGER HOSP OF COOK COUNT	Unsecured	180.00	NA	NA	0.00	0.00
LITTLE CO MARY HOSP PROF SERV	Unsecured	10.00	NA	NA	0.00	0.00
LITTLE CO MARY HOSP PROF SERV	Unsecured	2,000.00	NA	NA	0.00	0.00
MADISON EMERGENCY PHYSICIANS	Unsecured	500.00	NA	NA	0.00	0.00
NEUROLOGY CONSULTANTS	Unsecured	41.00	NA	NA	0.00	0.00
NORTHWEST COLLECTORS	Unsecured	105.00	NA	NA	0.00	0.00
NRI LABORATORIES	Unsecured	2.00	NA	NA	0.00	0.00
OAKLAWN RADIOLOGY IMAGING	Unsecured	140.00	NA	NA	0.00	0.00
PAYDAY LOAN STORE	Unsecured	1.00	NA	NA	0.00	0.00
PAYDAY LOAN STORE	Unsecured	1,900.00	1,936.91	1,936.91	0.00	0.00
PEOPLES GAS LIGHT & COKE CO	Unsecured	51.00	NA	NA	0.00	0.00

Scheduled Creditors:

Creditor Name	Class	Claim Scheduled	Claim Asserted	Claim Allowed	Principal Paid	Int. Paid
PNC BANK	Unsecured	60.00	NA	NA	0.00	0.00
PREMIER BANKCARD/CHARTER	Unsecured	475.00	NA	NA	0.00	0.00
RADIOLOGY IMAGING CONSULTANT	Unsecured	40.00	NA	NA	0.00	0.00
RADIOLOGY IMAGING SPECIALISTS	Unsecured	40.00	NA	NA	0.00	0.00
Receivables Management	Unsecured	32.00	NA	NA	0.00	0.00
Receivables Management	Unsecured	27.00	NA	NA	0.00	0.00
Receivables Management	Unsecured	20.00	NA	NA	0.00	0.00
Receivables Management	Unsecured	18.00	NA	NA	0.00	0.00
SCHOLASTIC BOOK CLUBS	Unsecured	200.00	NA	NA	0.00	0.00
SOUTH SUBURBAN HOSPITAL	Unsecured	400.00	NA	NA	0.00	0.00
SOUTH SUBURBAN HOSPITAL	Unsecured	17.00	NA	NA	0.00	0.00
SSMHC OF WISCONSIN	Unsecured	170.00	NA	NA	0.00	0.00
ST IL TOLLWAY AUTHORITY	Unsecured	196,614.00	197,180.50	197,180.50	0.00	0.00
TCF NATIONAL BANK	Unsecured	300.00	NA	NA	0.00	0.00
US CELLULAR	Unsecured	200.00	133.12	133.12	0.00	0.00
VILLAGE OF HAZEL CREST	Unsecured	250.00	NA	NA	0.00	0.00
VILLAGE OF MAYWOOD	Unsecured	60.00	NA	NA	0.00	0.00

Summary of Disbursements to Creditors:

	Claim Allowed	Principal Paid	Interest Paid
Secured Payments:			
Mortgage Ongoing	\$0.00	\$0.00	\$0.00
Mortgage Arrearage	\$0.00	\$0.00	\$0.00
Debt Secured by Vehicle	\$0.00	\$0.00	\$0.00
All Other Secured	\$0.00	\$0.00	\$0.00
TOTAL SECURED:	\$0.00	\$0.00	\$0.00
Priority Unsecured Payments:			
Domestic Support Arrearage	\$0.00	\$0.00	\$0.00
Domestic Support Ongoing	\$0.00	\$0.00	\$0.00
All Other Priority	\$8,283.73	\$0.00	\$0.00
TOTAL PRIORITY:	\$8,283.73	\$0.00	\$0.00
GENERAL UNSECURED PAYMENTS:	\$202,244.35	\$0.00	\$0.00

Disbursements:

Expenses of Administration	<u>\$400.00</u>
Disbursements to Creditors	<u>\$0.00</u>

TOTAL DISBURSEMENTS :

\$400.00

12) The trustee certifies that, pursuant to Federal Rule of Bankruptcy Procedure 5009, the estate has been fully administered, the foregoing summary is true and complete, and all administrative matters for which the trustee is responsible have been completed. The trustee requests a final decree be entered that discharges the trustee and grants such other relief as may be just and proper.

Dated: 11/02/2015

By: /s/ Tom Vaughn

Trustee

STATEMENT: This Unified Form is associated with an open bankruptcy case, therefore, Paperwork Reduction Act exemption 5 C.F.R. § 1320.4(a)(2) applies.